

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE HERE (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>LB</i>	<i>10</i>	<i>08/20/01</i>
O.I.P.E. CLASSIFIER		<i>56208</i>	<i>10-301</i>
FORMALITY REVIEW	<i>LT</i>	<i>1106</i>	<i>1/8/02</i>
RESPONSE FORMALITY REVIEW	<i>LT</i>	<i>508</i>	<i>02/04/02</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	10/24/02
2	10/24/02
3	10/24/02
4	10/24/02
5	10/24/02
6	10/24/02
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8	10/24/02
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50	10/24/02

Claim	Date
Final	
Original	
51	10/24/02
52	10/24/02
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98	10/24/02
99	10/24/02
100	10/24/02

Claim	Date
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If more than 150 claims or 10 actions  
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52-535

784/4

830  
10/04/02  
804  
11/09